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APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART UNIT	EXAMINER
		362		2875	

(FACE)

NOTICE OF ALLOWANCE MAILED		CLAIMS ALLOWED	
	Assistant Examiner	Total Claims	Print Claim for O.G
ISSUE FEE		DRAWING	
Amount Due	Date Paid	Sheets Drwg.	Figs.Drwg.	Print Fig.
	Primary Examiner		
TERMINAL DISCLAIMER	PREPARED FOR ISSUE	Application Examiner	

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